

**Biweekly Payroll Deductions
July 1, 2006 – June 30, 2007**

Full-Time Employees

Medical	High Option PPO	Low Option PPO	Catastrophic PPO	Cigna HMO
Employee	\$20	\$0	\$0	\$0
Employee + Spouse (or Domestic partner)	\$90	\$59	\$0	\$56
Employee + Child(ren)	\$67	\$40	\$0	\$38
Employee + Family	\$129	\$92	\$0	\$87

Dental	MetLife High	MetLife Low	Cigna DMO
Employee	\$5	\$0	\$0
Employee + 1	\$17	\$6	\$2
Employee + 2 or more	\$29	\$13	\$5

Vision	Cost
Employee	\$0
Employee + 1	\$3
Employee + 2 or more	\$4

Part-Time Employees

Medical	High Option PPO 20 Hrs	High Option PPO 30 Hrs	Low Option PPO 20 Hrs	Low Option PPO 30 Hrs	Catastrophic PPO 20 Hrs	Catastrophic PPO 30 Hrs	Cigna HMO 20 Hrs	Cigna HMO 30Hrs
Employee	\$127	\$74	\$99	\$49	\$94	\$47	\$93	\$47
Employee + Spouse (or Domestic partner)	\$280	\$185	\$227	\$143	\$188	\$94	\$216	\$136
Employee + Child(ren)	\$229	\$148	\$184	\$112	\$157	\$78	\$176	\$107
Employee + Family	\$364	\$246	\$297	\$194	\$239	\$120	\$283	\$185

Dental	MetLife High 20 Hrs	MetLife High 30 Hrs	MetLife Low 20 Hrs	MetLife Low 30 Hrs	Cigna DMO 20 Hrs	Cigna DMO 30 Hrs
Employee	\$11	\$8	\$6	\$3	\$3	\$1
Employee + 1	\$26	\$21	\$15	\$11	\$6	\$4
Employee + 2 or more	\$41	\$35	\$25	\$19	\$10	\$8

Vision	20 Hrs	30 Hrs
Employee	\$2	\$1
Employee + 1	\$5	\$4
Employee + 2 or more	\$6	\$5